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JOHNSTON & SASSER, P.A.  
ATTORNEYS AND COUNSELORS AT LAW

MAILING ADDRESS:  
POST OFFICE BOX 997  
BROOKSVILLE, FLORIDA 34605-0997

29 SO. BROOKSVILLE AVE.  
BROOKSVILLE, FLORIDA  
TELEPHONE: (352) 796-5123  
FAX: (352) 799-3187

4026 COMMERCIAL WAY  
SPRING HILL, FLORIDA  
TELEPHONE: (352) 688-7490

JOSEPH E. JOHNSTON, JR.  
DAVID C. SASSER  
DARRYL W. JOHNSTON

April 19, 2000

Division of Corporations  
Department of State  
The Capitol  
P.O. Box 6327  
Tallahassee, FL 32314

000003218470--7  
-04/21/00--01070--001  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

RE: Nature Coast Family Practice, P.a.

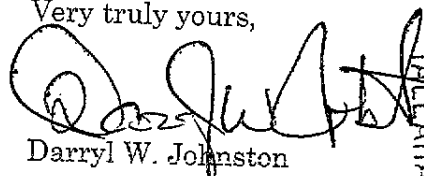
Gentleman:

Enclosed is the signed original Statement of Change of Registered Office or Registered Agent or Both for Corporations with regard to the referenced professional association. We have also enclosed a check in the amount of \$35.00 for the filing of this statement.

Please process this at your earliest opportunity and return the certified copy of the Articles of Incorporation to this office.

Thank you for your assistance. If you have any questions, please do not hesitate to call us.

Very truly yours,

  
Darryl W. Johnston

DWJ:bsj  
Enclosures  
cc: Lisa Eugenia Lastowski

FILED  
00 APR 21 PM 3:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T BROWN APR 28 2000

Registered office change

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED  
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,  
the undersigned corporation organized under the laws of the State of Florida  
submits the following statement in order to change its registered office or registered agent, or both, in  
the State of Florida.

1. The name of the corporation is: Nature Coast Family Practice, P.A.

2. The mailing address of the corporation is: P. O. Box 3310, Brooksville, FL 34611-3310

3. Date of incorporation/qualification: 2/17/2000 Document number: P00000016974

4. The name and address of the current registered agent and office:

Lisa Eugenia Lastowski

11198 Spring Hill Drive

Spring Hill, FL 34609

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

Lisa Eugenia Lastowski

11077 Spring Hill Drive

Spring Hill, FL 34608

The street address of its registered office and the street address of the business office of its registered  
agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so  
authorized by the board.

(Signature of an officer, chairman or vice chairman of the board)

4/17/00

(Date)

Lisa Eugenia Lastowski

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated  
corporation, I hereby accept the appointment as registered agent and agree to act in this capacity.  
I further agree to comply with the provisions of all statutes relative to the proper and complete  
performance of my duties, and I am familiar with and accept the obligation of my position as  
registered agent.

(Signature of Registered Agent)

4/17/00

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

**\*\*\* FILING FEE: \$35.00 \*\*\***